Principles of Risk Assessment for Mental Health Jail Diversion

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Presentation Overview

- Introduction
- Overview of risk assessment approaches
- Selecting a risk assessment tool
- Using risk assessment tools to improve outcomes

Introduction to Risk Assessment in Mental Health Jail Diversion

Screening vs. Assessment

Screening

- Identification of individuals at potentially heightened risk for recidivism
- Indicate a need for further evaluation or preliminary intervention

Assessment

- Comprehensive evaluation of likelihood of recidivism
- Consider individual's functioning across <u>multiple</u> domains
- Integrates information from multiple sources



Risk vs. Other Types of Assessment

- Risk assessment is distinct from assessment of one particular risk factor or need factor
- Examples
 - Substance use
 - Mental health
 - Psychopathy
 - Intelligence

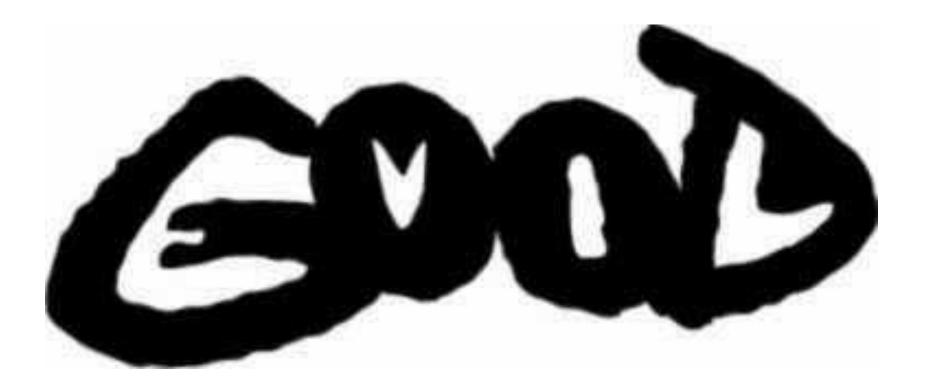
Types of Factors

- Risk factor vs. need
- Treatment targets and outcomes
- Distal vs. proximal
 - Timing of risk
- Static vs. dynamic
 - Historical vs. static
 - Stable vs. acute dynamic
- Risk factor vs. protective factor

Timing of Risk

Outcome Timeframe Predictor Timeframe Immediate Hours to days Proximal Short-term Weeks to months Longer term Distal Years

Protective Factors



Protective Factors

"Treatment is not just fixing what is broken; it is nurturing what is best."

Risk Assessment Outcomes

- Recidivism is not one thing:
 - Any offending
 - Violent offending
 - Nonviolent offending
 - Breach of conditions
 - ▶ Failure to appear
 - Institutional infraction

Need to operationalize "danger to public safety".



Mental Health Jail Diversion Context

Traditional Court Processes

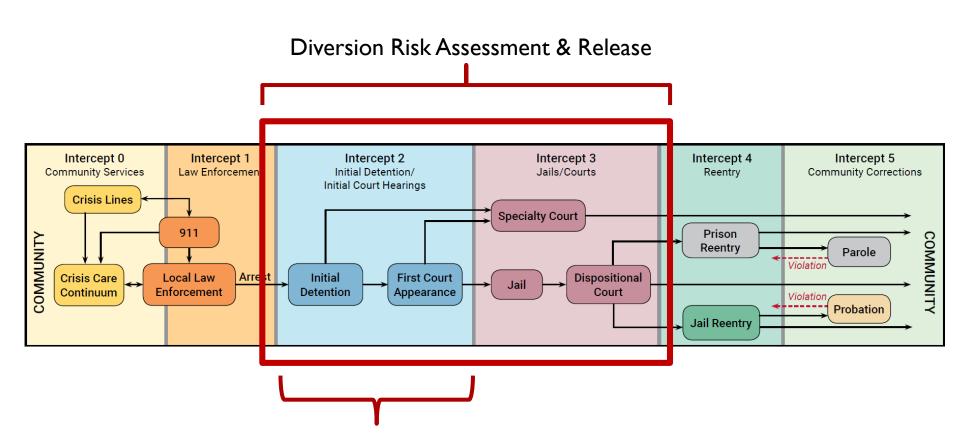
- "Get tough policies" ineffective
 - ▶ Do not meet criteria for effective punishment:
 - Maximum intensity
 - Immediate
 - Consistent application
 - Blocking of escape and alternatives
- Shift towards rehabilitation

Mental Health Jail Diversion

- ▶ Reduced risk of recidivism with adherence to:
 - Risk principle
 - 2. Need principle
 - 3. Responsivity principle
- Mental health jail diversion represents a strategy to implement these principles.

Requires assessment of <u>individual</u> risks, needs, and strengths.

Timing of Diversion & Assessment



Pretrial Risk Assessment & Release

California Diversion Context

- At least 3 things to be assessed in the context of mental health jail diversion:
 - 1. Mental health diagnosis
 - Mental health disorder played significant role in commission of charged offense(s) (and treatment would reduce recidivism)
 - Individual does not pose unreasonable risk of danger to public safety
 - "...unreasonable risk that the petitioner will commit a new violent felony..."

Penal Code Section 1170.18



Overview of Risk Assessment Approaches

Risk Assessment

- Process of evaluating and managing <u>likelihood</u> of future behaviors
 - Incompletely understood
 - Probabilities change across time
 - Interaction between characteristics & situations
- Can be:
 - Unstructured
 - Structured
 - Mechanical
 - ▶ Allow for professional judgment

Evolution of Risk Assessment

First Generation

Unstructured professional judgment

1st Generation

- Unstructured professional judgment
- Advantages
 - Convenient, flexible
 - Inexpensive
 - Widely accepted
 - ▶ Able to inform treatment and management

1st Generation

- Unstructured professional judgment
- Disadvantages
 - ▶ Training and expertise
 - Lack of transparency
 - Highly susceptible to biases
 - Lack of consistency
 - Accuracy no better than chance

"Flipping Coins in the Courtroom"

Evolution of Risk Assessment

First Generation

Unstructured professional judgment



Second Generation

Focus on static factors

2nd Generation

- Empirically-based, comprised of static risk factors
- Advantages
 - Transparent and objective
 - Good reliability and predictive accuracy
 - (Relatively) quick and easy

2nd Generation

- Empirically-based, comprised of static risk factors
- Disadvantages
 - Atheoretical
 - Limited identification of treatment targets
 - Limited integration of intervention
 - Do not allow for change over time

Broken Leg Dilemma

- Life events and circumstances change limiting applicability of risk assessment results
 - Examples
 - Physical incapacity
 - Setting
 - Interpersonal relationships
 - Employment
 - Intervention



Evolution of Risk Assessment

First Generation

Unstructured professional judgment



Second Generation

Focus on static factors



Third Generation

Consideration of dynamic factors & criminogenic needs

3rd Generation

- Empirically-based and include wider variety of factors
 - Dynamic risk factors and criminogenic needs
- Advantages
 - Transparent
 - Sensitive to change over time
 - Good reliability and predictive accuracy
 - Theoretically sound
 - Identification of treatment targets

3rd Generation

- Empirically-based and include wider variety of factors
 - Dynamic risk factors and criminogenic needs
- Disadvantages
 - Repeated administration required to detect change
 - Potentially shorter shelf life
 - More time consuming
 - Limited integration of intervention

Evolution of Risk Assessment

First Generation

Unstructured professional judgment



Second Generation

Focus on static factors



Third Generation

Consideration of dynamic factors & criminogenic needs



Fourth Generation

Integration with case management

Monahan (1981); Bonta et al (2006)

4th Generation

- Integration of risk management, treatment targets and modalities, and assessment of progress
- Advantages
 - Transparent
 - Sensitive to change over time
 - Good reliability and predictive accuracy
 - Theoretically sound
 - Allow for professional judgment
 - Incorporates intervention

4th Generation

- Integration of risk management, treatment targets and modalities, and assessment of progress
- Disadvantages
 - Repeated administration required to detect change
 - Potentially shorter shelf life
 - More time consuming
 - More training and expertise
 - Smaller research base

Selecting a Risk Assessment Tool

Risk Assessment Tools

- Increased requirement and use of risk assessment tools in mental health diversion
- Many different tools available, varying in:
 - Evidence
 - Intended population
 - Intended outcome
 - Content
 - User qualifications
 - Length

Examples

- Recidivism risk assessment
 - Ohio Risk Assessment System (ORAS)
 - Level of Service (LS) instruments
 - ▶ LSI-R, LS/RNR, LS/CMI
 - Correctional Offender Management Profile for Alternative Sanctions (COMPAS)
- Violence risk assessment
 - ► Historical-Clinical-Risk-20 (HCR-20)
 - Short-Term Assessment of Risk and Treatability (START)
- Pretrial risk assessment
 - Public Safety Assessment (PSA)
 - Virginia Pretrial Risk Assessment Instrument (VPRAI)

Selecting a Risk Assessment Tool

- Answer the following questions:
 - What is the evidence?
 - 2. What is your outcome of interest?
 - 3. What is your population?
 - 4. What is your assessment context?

1. What is the evidence?

- Tools differ widely in terms of empirical evaluation
- No one instrument produces most reliable and most accurate assessments
 - ▶ Some differences in performance as a function of:
 - Setting
 - Subgroup
 - Outcome
 - ▶ Timing of assessment
 - ▶ Timeframe of prediction

Examples of Evidence

- ORAS
 - Several evaluations (many unpublished)
- Level of Service tools
 - More than 120 independent evaluations
- COMPAS
 - >30 evaluations (most unpublished)
 - Majority by tool publisher and results unavailable to public
- ▶ HCR-20
 - Hundreds of independent evaluations
- START
 - Dozens of independent evaluations

2. What is your outcome of interest?

- Some instruments designed for and perform better in assessing likelihood of particular outcomes
 - General recidivism vs. violent recidivism
- Some instruments more/less relevant to intervention
 - Prediction vs. management
 - Item content and composition

Estimated Risks

	Risk Estimates Produced				
	Any Offending	Pretrial Crime	Any Violence	Pretrial Violence	Failure to Appear
ORAS*	X	X	X		X
LS	X				
COMPAS*	X	X			X
HCR-20			X		
START	X		X		
PSA		X		X	X
VPRAI		X			X

^{*}Different instruments for different stages of criminal justice processing.

Desmarais & Singh (2013); Desmarais, Zottola, Duhart Clarke, & Lowder (in prep)

3. What is your population?

- Some instruments developed for specific populations
 - ORAS & COMPAS have different tools for different populations and assessment points
 - ▶ PSA & VPRAI pretrial defendants
 - LS, HCR-20, and START non-specific
- Some instruments perform better for some subgroups
- Limited research into predictive validity for other subgroups

4. What is your context?

- Information and time available to complete assessment
 - ▶ Instruments vary in length from 4 − 120+ items
 - Some require in-depth evaluation and case review
- Staff training and background
- Assessment point
- Prediction timeframe
- Purpose of assessment
 - Determine unreasonable threat to public safety?
 - Estimate likelihood of success in diversion?

Using Risk Assessment to Improve Mental Health Diversion Outcomes

Improving Outcomes

Accurate and reliable risk assessments <u>do not</u> improve outcomes



Improving Outcomes

- ▶ To improve outcomes, risk assessment tools must be:
 - Implemented with fidelity
 - 2. Communicated to others
 - 3. Used to inform decision-making and case management
 - 4. Reviewed and amended over time

1. Successful Implementation

- Steps to successful implementation in practice:
 - 1. Prepare
 - 2. Establish stakeholder and staff buy-in
 - 3. Select and prepare the risk assessment tool
 - 4. Prepare policies and essential documents
 - 5. Training
 - 6. Implement pilot test
 - 7. Full implementation
 - 8. Ongoing tasks for sustainability

2. Communicate Assessment Results

- Completing the form and/or report ≠ communication
 - Must be communicated within and between stakeholders
- Recommended practices
 - Be explicit
 - Know your target audience
 - Qualify limitations of assessment
 - Contextualize the risks and needs
 - Describe plausible scenarios and contingencies

3. Inform Decisions & Interventions

- Risk-Need-Responsivity Model
 - Best practice for assessing and treating offenders
 - Framework for how to use results of risk assessment to inform decision-making and intervention
- Improve mental health diversion outcomes with adherence to:
 - 1. Risk principle
 - 2. Need principle
 - 3. Responsivity principle

Risk Principle

- □ Match level of risk
 - □ Higher risk → more resources
 - □ Lower risk → fewer resources
- □ Over-intervening → increase adverse outcomes
 - Increase risk factors
 - Reducing protective factors

Balance public safety risk with enough recidivism risk to warrant level of services and intervention.

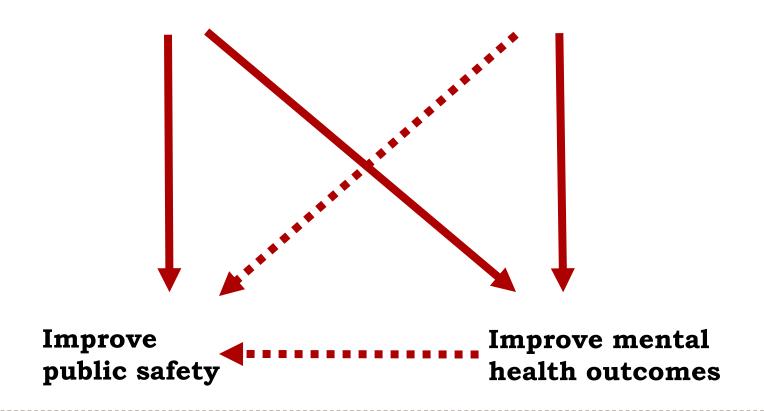


Need Principle

- Target individual risk and protective factors relevant to risk of adverse outcomes for that individual.
 - Examples
 - Substance use
 - Mood
 - Attitudes

But... in mental health diversion

▶ Address criminogenic and mental health needs



Responsivity Principle

- Take into account factors that can affect outcomes
 - Examples
 - Intellectual functioning
 - Maturity
 - Mental health symptoms
 - Learning style
 - Motivation
- Build upon individual strengths

4. Review and Amendment

- Both the assessment and plan have a shelf-life
- Implement mechanism and timeline for review
 - Modify as necessary
- Not necessary to start from scratch
 - What has changed (for better or worse)?
 - What is the same?
 - What do we need to do differently for the individual and with the individual?

Thank you!

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